## Senate File 1 - Introduced

SEN.	ATE FILE	
BY	BEALL	

(COMPANION TO LSB 1118HH BY ZIRKELBACH)

Passed	Senate,	Date	Passed	House,	Date		
Vote:	Ayes	Nays	Vote:	Ayes _		Nays	_
Approved					-		

## A BILL FOR

1 An Act requiring certain group health insurance policies, contracts, or plans to provide coverage for autism spectrum disorders for certain persons, requiring certification of behavior specialists, and providing an applicability date. BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: TLSB 1118XS 83 7 av/rj/14

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- Section 1. <u>NEW SECTION</u>. 514C.24 AUTISM SPECTRUM 2 DISORDERS COVERAGE.
- 1. Notwithstanding the uniformity of treatment 4 requirements of section 514C.6, a group policy, contract, or 5 plan providing for third=party payment or prepayment of 6 health, medical, and surgical coverage benefits shall provide 7 coverage benefits to covered individuals under twenty=one 8 years of age for the diagnostic assessment of autism spectrum 9 disorders and for the treatment of autism spectrum disorders 1 10 if the policy, contract, or plan is either of the following:
- 1 11 a. A policy, contract, or plan issued by a carrier, as 1 12 defined in section 513B.2, or an organized delivery system 1 13 authorized under 1993 Iowa Acts, chapter 158, to an employer 1 14 who on at least fifty percent of the employer's working days 1 15 during the preceding calendar year employed more than fifty 1 16 full=time equivalent employees. In determining the number of 1 17 full=time equivalent employees of an employer, employers who 18 are affiliated or who are able to file a consolidated tax 1 19 return for purposes of state taxation shall be considered one 1 20 employer.
  - 21 b. A plan established pursuant to chapter 509A for public 22 employees.
- 1 23 2. As used in this section, unless the context otherwise 24 requires:
- a. "Applied behavioral analysis" means the design, 1 26 implementation, and evaluation of environmental modifications, 1 27 using behavioral stimuli and consequences, to produce socially 1 28 significant improvement in human behavior or to prevent loss 1 29 of attained skill or function, including the use of direct 1 30 observation, measurement, and functional analysis of the 31 relations between environment and behavior.
  - "Autism service provider" means a person, entity, or 32 33 group providing treatment of autism spectrum disorders, 34 pursuant to a treatment plan.
  - "Autism spectrum disorders" means any of the pervasive 35 1 developmental disorders including autistic disorder, 2 Asperger's disorder, and pervasive developmental disorders not 3 otherwise specified. The commissioner, by rule, shall define 4 "autism spectrum disorders" consistent with definitions 5 provided in the most recent edition of the American 6 psychiatric association's diagnostic and statistical manual of 7 mental disorders, as such definitions may be amended from time 8 to time. The commissioner may adopt the definitions provided
- 9 in such manual by reference. 2 10 d. "Behavior specialist" means an individual, certified by 2 11 the commissioner, who designs, implements, or evaluates a 2 12 behavior modification intervention component of a treatment 2 13 plan, including those based on applied behavioral analysis, to

2 14 produce socially significant improvements in human behavior or 2 15 to prevent loss of attained skill or function, through skill 2 16 acquisition and the reduction of problematic behavior. 2 17 e. "Diagnostic assessment of autism spectrum disorders"

- 2 18 means medically necessary assessment, evaluations, or tests 2 19 performed by a licensed physician, licensed physician 20 assistant, licensed psychologist, or licensed registered nurse 21 practitioner to diagnose whether an individual has an autism 2 22 spectrum disorder.
- "Pharmacy care" means medications prescribed by a f. 24 licensed physician, licensed physician assistant, or licensed 2 25 registered nurse practitioner and any assessment, evaluation, 26 or test prescribed or ordered by a licensed physician, 27 licensed physician assistant, or licensed registered nurse 2 28 practitioner to determine the need for or effectiveness of 2 29 such medications.
- "Psychiatric care" means direct or consultative q. 31 services provided by a licensed physician who specializes in 2 32 psychiatry.
  - h. "Psychological care" means direct or consultative 34 services provided by a licensed psychologist.

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- i. "Rehabilitative care" means professional services and 2 35 1 treatment programs, including applied behavioral analysis, 2 provided by an autism service provider to produce socially 3 significant improvement in human behavior or to prevent loss 4 of attained skill or function.
  - j. "Therapeutic care" means services provided by a licensed speech pathologist, licensed occupational therapist, or licensed physical therapist.
- "Treatment of autism spectrum disorders" means k. treatment that is identified in a treatment plan and includes 3 10 medically necessary pharmacy care, psychiatric care, 3 11 psychological care, rehabilitative care, and therapeutic care 3 12 that is one of the following:
- (1) Prescribed, ordered, or provided by a licensed 3 14 physician, licensed physician assistant, licensed 3 15 psychologist, licensed social worker, or licensed registered 3 16 nurse practitioner.
  - (2) Provided by an autism service provider.
- (3) Provided by a person, entity, or group that works 3 19 under the direction of an autism service provider.
  3 20 1. "Treatment plan" means a plan for the treatment of
- 3 21 autism spectrum disorders developed by a licensed physician or 22 licensed psychologist pursuant to a comprehensive evaluation 3 23 or reevaluation performed in a manner consistent with the most 3 24 recent clinical report or recommendations of the American 3 25 academy of pediatrics, as determined by the commissioner by 26 rule.
- Coverage is required pursuant to this section in a 28 maximum benefit amount of not less than thirty=six thousand 29 dollars per year but shall not be subject to any limits on the 30 number of visits to an autism service provider for treatment 3 31 of autism spectrum disorders. Beginning in 2013, the 32 commissioner shall, on or before April 1 of each calendar 33 year, publish an adjustment to the maximum benefit required 34 equal to the percentage change in the United States department 35 of labor consumer price index for all urban consumers in the 1 preceding year, and the published adjusted maximum benefit 2 shall be applicable to group policies, contracts, or plans 3 subject to this section that are issued or renewed on or after 4 January 1 of the following calendar year. Payments made under 5 a group policy, contract, or plan subject to this section on 6 behalf of a covered individual for treatment of a health condition unrelated to or distinguishable from the individual's autism spectrum disorder shall not be applied 9 toward any maximum benefit established under this subsection.
- 10 4. Coverage required pursuant to this section shall be 11 subject to copayment, deductible, and coinsurance provisions, 12 and any other general exclusions or limitations of a group 4 13 policy, contract, or plan to the same extent as other medical 4 14 or surgical services covered by the group policy, contract, or 4 15 plan.
- 4 16 Coverage required by this section shall be provided in 4 17 coordination with coverage required for the treatment of
- 18 autistic disorders pursuant to section 514C.22.
  19 6. This section shall not be construed to limit benefits 4 19 4 20 which are otherwise available to an individual under a group
- 4 21 policy, contract, or plan. 4 22 7. This section shall not be construed to require coverage 4 23 by a group policy, contract, or plan of any service solely 4 24 based on inclusion of the service in an individualized

4 25 education program. Consistent with federal or state law and 4 26 upon consent of the parent or quardian of a covered 4 27 individual, the treatment of autism spectrum disorders may be 4 28 coordinated with any services included in an individualized 4 29 education program. However, coverage for the treatment of 4 30 autism spectrum disorders shall not be contingent upon 4 31 coordination of services with an individualized education 4 32 program.

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This section shall not apply to accident=only, 34 specified disease, short=term hospital or medical, hospital 35 confinement indemnity, credit, dental, vision, Medicare 1 supplement, long=term care, basic hospital and 2 medical=surgical expense coverage as defined by the commissioner, disability income insurance coverage, coverage issued as a supplement to liability insurance, workers' 5 compensation or similar insurance, or automobile medical 6 payment insurance, or individual accident and sickness 7 policies issued to individuals or to individual members of a 8 member association.

9. A carrier, organized delivery system, or plan 10 established pursuant to chapter 509A may manage the benefits 5 11 provided through common methods including but not limited to 5 12 providing payment of benefits or providing care and treatment 5 13 under a capitated payment system, prospective reimbursement 5 14 rate system, utilization control system, incentive system for 5 15 the use of least restrictive and costly levels of care, a 16 preferred provider contract limiting choice of specific 17 providers, or any other system, method, or organization 5 18 designed to assure services are medically necessary and 5 19 clinically appropriate.

10. An insurer may review a treatment plan for treatment 21 of autism spectrum disorders once every six months, subject to 22 its utilization review requirements, including case 23 management, concurrent review, and other managed care 24 provisions. A more or less frequent review may be agreed upon 5 25 by the insured and the licensed physician or licensed 5 26 psychologist developing the treatment plan.

5 27 11. For the purposes of this section, the results of a 5 28 diagnostic assessment of autism spectrum disorder shall be 5 29 valid for a period of not less than twelve months, unless a 30 licensed physician or licensed psychologist determines that a 31 more frequent assessment is necessary.

12. The commissioner, in consultation with the board of 33 medicine, shall adopt rules providing for the certification of 34 behavior specialists.

a. An applicant for a certificate as a behavior specialist 1 shall submit a written application on forms provided by the commissioner evidencing and insuring that the applicant meets all of the following requirements:

(1)Is of good moral character.

Has received a master's or higher degree from a (2) board=approved, accredited college or university, including a major course of study in school, clinical, or counseling 8 psychology, special education, social work, speech therapy, occupational therapy, or another related field.

(3) Has at least one year of experience involving

11 functional behavior assessments, including the development and 6 12 implementation of behavioral supports or treatment plans.

- (4) Has completed at least one thousand hours in direct 6 14 clinical experience with individuals with behavioral 6 15 challenges or at least one thousand hours experience in a 6 16 related field with individuals with autism spectrum disorders.
- (5) Has completed relevant training programs, including 6 17 6 18 professional ethics, autism=specific training, assessments 6 19 training, instructional strategies and best practices, crisis 6 20 intervention, comorbidity and medications, family 6 21 collaboration, and addressing specific skill deficits 6 22 training. 2.3
- The commissioner shall not issue a certificate to an 6 24 applicant who has been convicted of a felony, of a controlled 25 substance=related offense under chapter 124 or of the laws of 26 another jurisdiction unless all of the following requirements 6 27 have been met:
  - (1) At least ten years have elapsed from the date of 29 conviction of such an offense.
- The applicant satisfactorily demonstrates to the 30 (2) 31 commissioner that the applicant has made significant progress 32 in personal rehabilitation since the conviction such that 33 certification of the applicant would not be expected to create 6 34 a substantial risk of harm to the health and safety of 6 35 patients or the public, or a substantial risk of further

1 criminal violations.

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- (3) The applicant otherwise satisfies the requirements of 3 this subsection.
- 13. The commissioner shall adopt rules pursuant to chapter 5 17A to implement and administer this section.
- 14. This section applies to third=party payment provider 7 policies, contracts, or plans, and to plans established 8 pursuant to chapter 509A that are delivered, issued for 9 delivery, continued, or renewed in this state on or after 10 January 1, 2010.

## EXPLANATION

This bill creates new Code section 514C.24 which requires 7 13 certain group health insurance policies, contracts, or plans 14 to provide coverage benefits for the diagnosis and treatment 7 15 of autism spectrum disorders. The new provision is applicable 7 16 to group health policies, contracts, or plans issued to 7 17 employers with more than 50 employees and to health plans 7 18 established under Code chapter 509A for public employees. 7 19 Coverage benefits are required for covered individuals under 20 21 years of age.

"Autism spectrum disorders" includes autistic disorder, 7 22 Asperger's disorder, and pervasive developmental disorder not 23 otherwise specified, as defined by the commissioner of 24 insurance by rule consistent with definitions provided in the 25 most recent edition of the American psychiatric association's 7 26 diagnostic and statistical manual of mental disorders.

Required coverage for the diagnosis and treatment of autism 7 28 spectrum disorders must be not less than \$36,000 per year and 7 29 without limits on the number of visits to an autism service 30 provider. Beginning in 2013, the commissioner is required to 31 make annual adjustments to the maximum benefit required equal 32 to the change in the United States department of labor 33 consumer price index. Payments made on behalf of a covered 34 individual that are unrelated to or distinguishable from the 35 individual's autism spectrum disorder cannot be applied toward 1 this maximum benefit.

Coverage of autism spectrum disorders under the new Code 3 section is to be provided in coordination with coverage 4 required for the treatment of autistic disorders pursuant to 5 Code section 514C.22. The section shall not be construed to 6 limit benefits otherwise available to an individual under a 7 group health policy, contract, or plan.

The commissioner, in consultation with the board of 8 9 medicine, is required to adopt rules for the certification of 8 10 behavior specialists who design, implement, or evaluate 8 11 behavior modification intervention components of treatment 8 12 plans for autism spectrum disorders that are developed by a 13 licensed physician or licensed psychologist.

The new Code section applies to third=party payment 8 14 8 15 provider policies, contracts, or plans, and to plans
8 16 established pursuant to Code chapter 509A that are delivered,
8 17 issued for delivery, continued, or renewed in this state on or 8 18 after January 1, 2010.

8 19 LSB 1118XS 83

8 20 av/rj/14